

APPENDIX G: INSTRUMENTS NEEDING WORK

Instruments Included in this Appendix

This Appendix provides instruments that require some adaptation before they can be used (e.g., making questions more applicable to DCWs beyond wording simplification, lowering readability levels, or changing the language of a survey) or are not easily available to the public.

While this Guide is not a “how-to” manual, here are a few things for organizations to consider when reviewing instruments that require adaptation:

1. If possible, organizations may consider working with researchers within their own organization or may make contact with a local researcher, university (e.g., survey research center, nursing department, organizational studies or labor department) or survey organization as they adapt these instruments. This will ensure that these adaptations are done correctly and do not change the overall meaning and intent of these instruments.
2. Some subscales are not relevant to DCWs. Other subscales have a few questions that may need alteration in order to make them applicable to DCWs, however. It is important to ask all of the questions in a subscale so that the information is meaningful.
3. Pre-testing is important as organizations adapt instruments. For instruments to be used effectively, organizations must ensure that their DCWs find the content, language, wording and readability to be understandable.

How the Instruments in this Appendix are Organized

A summary chart (as in Chapter 3) with the following features is included for each instrument: description, measure, administration, scoring, availability, reliability and validity of each instrument or set of subscales, and relevant contact information. Only descriptions of the “peer-to-peer work relationships” and “organizational structure” topic areas are included in Appendix G since they are the only topics not described in Chapter 3 (because no “ready” or “near ready” measures meeting the criteria were available). Organizations can consult Chapter 3 if they are interested in reviewing descriptions of the other topic areas.

Instruments which require new data collection -- measures of DCW job characteristics

Empowerment

- Conditions for Work Effectiveness Questionnaire (CWEQ I) and (CWEQ II Short Form) (3 of 6 subscales)
- Reciprocal Empowerment Scale (RES)

Job Design

- Job Characteristics Scales (JCS) of the Job Diagnostic Survey (JDS) Revised (1 of 5 subscales)

Job Satisfaction

- Abridged Job Descriptive Index (aJDI) (Short Form) Facet Scales
- Minnesota Satisfaction Questionnaire (MSQ) (Short Form)
- Misener Nurse Practitioner Satisfaction Scale

Peer-to-Peer Work Relationships

- Satisfaction with Co-Workers Subscale of the abridged Job Descriptive Index (aJDI) (1 of 5 subscales)

Worker-Supervisor Relationships

- External Satisfaction (ES) Subscale from the Minnesota Satisfaction Questionnaire (MSQ)
- Satisfaction with Co-Workers Subscale of the abridged Job Descriptive Index (aJDI) (1 of 5 subscales)

Instruments which require new data collection -- measures of the organization**Organizational Culture**

- Nursing Home Adaptation of the Organizational Culture Profile (OCP)

Organizational Structure

- Communication and Leadership Subscales of the Nursing Home Adaptation of the Shortell Organization and Management Survey

**Instruments Which Require New Data
Collection -- Measures of DCW Job
Characteristics**

Empowerment

Alternatives for Measuring Empowerment

*Conditions for Work Effectiveness Questionnaire (CWEQ I) and (CWEQ II Short Form) (3 of 6 subscales)*¹

Description	<p>The Conditions for Work Effectiveness Questionnaire (CWEQ- I) is a 31-item questionnaire designed to measure the four empowerment dimensions -- perceived access to opportunity, support, information and resources in an individual's work setting -- based on Kanter's ethnographic study of work empowerment (Kanter, 1977; Laschinger, 1996). Opportunity refers to opportunities for growth and movement within the organization as well as opportunity to increase knowledge and skills. Support relates to the allowance of risk taking and autonomy in making decisions. Information refers to having information regarding organizational goals and policy changes. Resources involve having the ability to mobilize resources needed to get the job done. Access to these empowerment structures is facilitated by (1) formal power characteristics such as flexibility, adaptability, creativity associated with discretionary decision-making, visibility, and centrality to organizational purpose and goals; and (2) informal power characteristics derived from social connections, and the development of communication and information channels with sponsors, peers, subordinates, and cross-functional groups. Chandler adapted the CWEQ from Kanter's earlier work to be used in a nursing population (1986).</p> <p>The CWEQ-II, a modification of the original CWEQ, consists of 19 items (three for <u>each</u> of Kanter's empowerment structures, 3 for the Formal Power (JAS) measure and 4 for the Informal Power (ORS) measure) (Laschinger et al., 2001). Because the CWEQ II is shorter to administer while still having comparable readability and measurement properties, only the CWEQ II survey items are provided.</p> <p>The CWEQ II has been studied and used frequently in nursing research since 2000 and has shown consistent reliability and validity. The University of Western Ontario Workplace Empowerment Research Program has been working with and revising the original CWEQ and CWEQ-II in nursing populations for over 10 years.</p>
Measure	<p><u>Subscales</u> (3 of 6)</p> <ul style="list-style-type: none"> (1) Information (2) Resources (3) Informal Power
Administration	<p><u>Survey Administration</u></p> <ul style="list-style-type: none"> (1) Paper and pencil (2) 10 to 15 minutes for entire scale (3) 19 questions for entire scale (4) 5-point Likert scale (none to a lot; no knowledge to know a lot) <p><u>Readability</u> Flesch-Kincaid: 7.9</p>
Scoring	<ul style="list-style-type: none"> (1) Simple calculations. (2) <u>Total empowerment score</u> = Sum of 6 subscales (Range 6 - 30). Subscale mean scores are obtained by summing and averaging items (range 1 - 5). (3) Higher scores indicate higher perceptions of empowerment.

¹ The other three subscales of the *Conditions for Work Effectiveness Questionnaire (CWEQ I) and (CWEQ II Short Form)* can be found in the Empowerment topic section in Chapter 3.

Availability	Free with permission from the author.
Reliability	Cronbach alpha reliabilities for the CWEQ-II ranges from 0.79 to 0.82, and 0.71 to 0.90 for the subscales.
Validity	<ul style="list-style-type: none"> • The CWEQ II has been validated in a number of studies. Detailed information can be obtained at: http://publish.uwo.ca/~hkl/. • Construct validity of the CWEQ II was supported in a confirmatory factor analysis. • The CWEQ II correlated highly with a global empowerment measure.
Contact Information	<p>Permission to use the CWEQ II can be obtained on-line at http://publish-uwo.ca/~hkl/ or by contacting the author:</p> <p>Heather Spence Laschinger, PhD University of Western Ontario School of Nursing London, Ontario, Canada N6A 5C1 (519) 661-4065 hkl@uwo.ca</p>

Survey Items

Key to Which Questions Fall into Which Subscales
I = Information subscale (3 items)
R = Resources subscale (3 items)
IP = Informal Power (4 items)

HOW MUCH ACCESS TO INFORMATION DO YOU HAVE IN YOUR PRESENT JOB?

			No Knowledge		Some Knowledge		Know A Lot
I	1.	The current state of the hospital.	1	2	3	4	5
I	2.	The values of top management.	1	2	3	4	5
I	3.	The goals of top management.	1	2	3	4	5

HOW MUCH ACCESS TO RESOURCES DO YOU HAVE IN YOUR PRESENT JOB?

			None		Some		A Lot
R	1.	Time available to do necessary paperwork.	1	2	3	4	5
R	2.	Time available to accomplish job requirements.	1	2	3	4	5
R	3.	Acquiring temporary help when needed.	1	2	3	4	5

HOW MUCH OPPORTUNITY DO YOU HAVE FOR THESE ACTIVITIES IN YOUR PRESENT JOB?

			None		Some		A Lot
IP	1.	Collaborating on patient care with physicians.	1	2	3	4	5
IP	2.	Being sought out by peers for help with problems.	1	2	3	4	5
IP	3.	Being sought out by managers for help with problems.	1	2	3	4	5
IP	4.	Seeking out ideas from professionals other than physicians, e.g., Physiotherapists, Occupational Therapists, Dieticians.	1	2	3	4	5

Reciprocal Empowerment Scale (RES)

Description	The Reciprocal Empowerment Scale (RES) was developed to measure empowerment of staff nurses with the underlying assumption that empowerment is a reciprocal process involving both leaders and followers. The instrument measures three dimensions of empowerment -- reciprocity, synergy and ownership. Reciprocity focuses on the leadership role and emphasizes leader behaviors such as sharing power, support, and information. Synergy involves the formation and communication of a vision, including contributions toward the development of the vision and the long-term direction of the organization. Ownership reflects the follower's internalization of the vision and organizational commitment.
Measure	<u>Subscales</u> (1) Reciprocity (2) Ownership (3) Synergy
Administration	<u>Survey Administration</u> (1) Paper and pencil (2) 15 minutes (3) 36 questions (4) 5-point Likert scale (not at all true to extremely true) <u>Readability</u> Flesch-Kincaid: 6.3
Scoring	(1) Simple calculations. (2) <u>Subscale score</u> = Sum of items on the subscale (Range 6 - 95, depending on subscale) <u>Total scale score</u> = Sum of subscale scores (Range 36 - 180) (3) Higher scores indicate higher perceptions of empowerment.
Availability	Free if used for research or non-commercial use.
Reliability	Internal consistency of total scale is .95; and ranges from .82 to .95 for subscales.
Validity	Construct validity <ul style="list-style-type: none"> • Correlations between subscales ranged from .32 to .60. • Total scale scores positively correlated with empowerment. • Total scale scores negatively correlated with alienation.
Contact Information	The entire instrument and permission to use the survey can be obtained by contacting: Marilyn Klakovich 1753 Brentwood Avenue Upland, CA 91784 (626) 815-5406 mklakovich@apu.edu

Sample Survey Items (6 of 36 items)

(Contact the author for the entire instrument)

Key to Which Questions Fall into Which Subscales for Entire Instrument

R = Reciprocity subscale (19 items)
S = Synergy subscale (11 items)
O = Ownership subscale (6 items)

Please circle the response that best indicates TO WHAT EXTENT, that is, how much each of the following statements is TRUE for you in YOUR PRACTICE or POSITION. There are no right answers.

When an item, refers to your leader, please consider this to be the individual to whom you most directly report (e.g. Director of Nursing). For the purpose of this survey, vision is defined as a statement which clarifies the current situation and induces commitment to the future.

		1 = NOT AT ALL TRUE (NT) 2 = SLIGHTLY TRUE (ST) 3 = MODERATELY TRUE (MT) 4= VERY TRUE (VT) 5 = EXTREMELY TRUE (ET)	NT	ST	MT	VT	ET
R	1.	My leader communicates clear, consistent expectations.	1	2	3	4	5
S	2.	The vision gives me a sense of purpose.	1	2	3	4	5
O	3.	I feel that I make a unique contribution to the organization.	1	2	3	4	5
R	4.	My leader uses my recommendations.	1	2	3	4	5
S	5.	What I do in my job really impacts the direction of the organization as a whole.	1	2	3	4	5
O	6.	I get the feeling of pride from the work I do.	1	2	3	4	5

Job Design

Alternatives for Measuring Job Design

Job Characteristics Scales (JCS) of the Job Diagnostic Survey (JDS) Revised (1 of 5 subscales)²

Description	<p>The Hackman and Oldham Job Characteristics Model is the dominant model for studying the impact of job characteristics on affective work outcomes (e.g., job satisfaction, empowerment, and motivation) and to a more limited extent behavioral outcomes (e.g., performance, absenteeism, and turnover intentions) (1975; 1980). The Job Characteristics Scales (JCS) are a component of the Job Diagnostic Survey (JDS), the most widely used instrument across many types of jobs to measure perceived job characteristics. The JDS was revised in 1987 to eliminate a measurement artifact resulting from reverse-worded questionnaire items. Only the revised version should be used (Idaszak & Drasgow, 1987).</p> <p>The JCS contain five subscales -- skill variety, task significance, autonomy, task identity and feedback. The JCS is often combined in surveys with other measures of workers' feelings about and satisfaction with their jobs. Hackman and Oldham recommend that it be administered during regular work hours in groups of no more than 15 respondents at a time (1980). Hackman and Oldham provide substantive guidelines for administration (1980).</p>
Measure	Task identity
Administration	<p><u>Survey Administration</u></p> <ol style="list-style-type: none"> (1) Paper and pencil (2) 3-5 minutes (3) 3 questions (4) 7-item Likert scale (very little to very much) <p><u>Readability</u> Flesch-Kincaid: 6.8</p>
Scoring	<ol style="list-style-type: none"> (1) Simple calculations. (2) <u>Subscale score</u> = Average of items on the subscale (Range 1 - 7) (3) Higher scores indicate better job design features.
Availability/ price	Free.
Reliability	Internal consistency ranges from .75 to .79 for the subscales.
Validity	<p>Criterion-related validity:</p> <ul style="list-style-type: none"> • Job design correlates with intent to leave and is predictive of absenteeism and job satisfaction
Contact Information	Not needed for use of the instrument.

² The other four subscales of the *Job Characteristics Scales (JCS) of the Job Diagnostic Survey (JDS) Revised* can be found in the Job Design topic section in Chapter 3.

Survey Items

Key to Which Questions Fall into Which Subscales

TI = Task Identity subscale (3 items)

On the following pages, you will find several different kinds of questions about your job. Specific instructions are given at the start of each section. Please read them carefully. It should take no more than 10 minutes to complete the entire questionnaire. Please move through it quickly.

The questions are designed to obtain your perceptions of your job. There are no trick questions. Your individual answers will be kept completely confidential. Please answer each item as honestly and frankly as possible. Thank you for your cooperation.

Section One

This part of the questionnaire asks you to describe your job listed above as objectively as you can. Try to make your description as accurate and as objective as you possibly can. Please do not use this part of the questionnaire to show us how much you like or dislike your job.

A sample question is given below.

A. To what extent does your job require you to work overtime?

1---	---2---	---3---	---4---	---5---	---6---	---7
Very little; the job requires almost no overtime hours.		Moderately; the job requires overtime at least a week.			Very much; the job requires overtime more than once a week.	

You are to circle the number which is the most accurate description of your job.

If, for example, your job requires you to work overtime two times a month -- you might circle the number six, as was done in the example above.

Survey Items

(TI) 1. To what extent does your job involve doing a whole and identifiable piece of work? That is, is the job a complete piece of work that has an obvious beginning and end? Or is it only a small part of the overall piece of work, which is finished by other people or by automatic machines?

1---	---2---	---3---	---4---	---5---	---6---	---7
The job is only a tiny part of the overall piece of work; the results of the person's activities cannot be seen in the final product or service.		The job is a moderate-sized "chunk" of the overall piece of work; the person's own contribution can be seen in the final outcome.			The job involves doing the whole piece of work, from start to finish; the results of the person's activities are easily seen in the final product or service.	

Section Two

Listed below are a number of statements which could be used to describe a job.

You are to indicate whether each statement is an accurate or an inaccurate description of your job.

Once again, please try to be as objective as you can in deciding how accurately each statement describes your job -- regardless of you like or dislike your job.

Write a number in the blank beside each statement, based on the following scale:

How accurate is the statement in describing your job?

1	2	3	4	5	6	7
Very Inaccurate (TI)	Mostly Inaccurate	Slightly Inaccurate	Uncertain	Slightly Accurate	Mostly Accurate	Very Accurate
(TI)	___ 1.	The job is arranged so that I can do an entire piece of work from beginning to end.				
(TI)	___ 2.	The job provides me with the chance to finish completely any work I start.				

Job Satisfaction

Alternatives for Measuring Job Satisfaction

Abridged Job Descriptive Index (aJDI) (Short Form) Facet Scales

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<p>Description</p>	<p>The Job Descriptive Index is perhaps the premier instrument for assessing job satisfaction. It is a multi-faceted assessment of job satisfaction that has been extensively used in research and applied settings for over 40 years. The JDI comes in both long (90 item) and short ("abridged - 25 item) versions. The short form or abridged JDI (aJDI), described here, poses less of an administrative and scoring burden and is, therefore, the version included here.</p> <p>Five facets of job satisfaction are assessed by the JDI. In the aJDI, each facet (or subscale) is composed of 5 items (25 items total). The facets are: work on present job; present pay; opportunities for promotion; supervision; and, coworkers.</p> <p>The JDI adheres to the idea that overall job satisfaction is not simply the sum of satisfaction with different aspects of work. Therefore, an additional scale, Job in General (JIG), evaluates overall job satisfaction. The short form of the JIG scale consists of 8 items.</p>
<p>Measure</p>	<p><u>Subscales</u></p> <ol style="list-style-type: none"> (1) Work on present job (2) Present pay (3) Opportunities for promotion (4) Supervision (5) Coworkers <p>A separate overall satisfaction scale (Job in General, or JIG) is also available.</p>
<p>Administration</p>	<p><u>Survey Administration</u></p> <ol style="list-style-type: none"> (1) Paper and pencil (2) 5-10 minutes (3) 25 questions (plus 8 items for Job in General) (4) Respondent indicates if each item does or does not describe their work situation <p><u>Readability</u> Flesch-Kincaid: 3.9</p>
<p>Scoring</p>	<ol style="list-style-type: none"> (1) Scoring algorithms are described in the User's Manual. SAS and SPSS scoring code is available. (2) Not known. (3) Not known.

Availability	<p>Bowling Green State University owns a copyright of the JDI and JIG. Cost depends on user status (academic or commercial) and whether the user is willing to share collected data with the JDI research group. User manuals and software are extra cost options.</p> <p>Non-academic users must pay a fee for the test booklets and scoring code. The base price for non-academic users for data collection instruments is \$100 per test booklet (100 forms). Additional cost items include SAS/SPSS scoring code (\$10.00) and the <i>Users Manual</i>: (\$50.00). Complete pricing information is available at: http://www.bgsu.edu/departments/psych/JDI/price.html.</p> <p>For academic research, fees for the data collection instruments may be waived in return for the user sharing item level data collected with the instrument with the JDI Research Group.</p>
Reliability	Internal consistency has been consistently shown to be > .70 for all subscales.
Validity	An extensive meta-analysis of the measurement properties of the JDI found that content, criterion-related, and convergent validity are well established (e.g., correlates as expected with turnover, and other job satisfaction measures).
Contact Information	<p>The JDI is available from:</p> <p>JDI Research Group, Bowling Green State University Department of Psychology Bowling Green, OH 43403 Phone: (419) 372-8247 jdi_ra@bgnet.bgsu.edu</p>

Sample Survey Items

NOTE: Below is only a sample of the items in the abridged Job Descriptive Index (aJDI). The complete aJDI is not available without charge; therefore, we cannot include here.

Key to Which Questions Fall into Which Subscales
--

Only a subset of items in each of the 6 subscales is provided below.
--

Think of the work you do at present. How well does each of the following words or phrases describe your job? In the blank beside each word or phrase: below, write:

 for "Yes" if it describes your work
 for "No" if it does NOT describe it
 for "?" if you can not decide

Work on Present Job

 Fascinating
 Pleasant
 Can see results

Present Pay

- Barely live on income
- Well-paid
- Bad

Opportunities for Promotion

- Regular promotions
- Promotion on ability
- Opportunities somewhat limited

Supervision

- Knows job well
- Doesn't supervise enough
- Around when needed

Co-Workers

- Stimulating
- Unpleasant
- Smart

Job in General

- Pleasant
- Worse than most
- Worthwhile

Minnesota Satisfaction Questionnaire (MSQ) (Short Form)

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Description	The Minnesota Satisfaction Questionnaire (MSQ) is a popular measure of job satisfaction that conceptualizes satisfaction as being related to either intrinsic or extrinsic aspects of the job. Intrinsic satisfaction is related to how people feel about the nature of their job tasks, while extrinsic satisfaction is concerned with aspects of the job that are external or separate from job tasks or the work itself. The MSQ has been in use for over 30 years in a wide range of jobs, including factory and production work, management, education (primary, secondary, college), health care (including nurses, physicians, and mental health workers), and sales. Several studies of nursing assistants in long term care facilities have used the MSQ (Friedman et al., 1999; Grieshaber et al., 1995; Waxman et al., 1984).
Measure	<u>Subscales</u> (1) Intrinsic job factors (2) Extrinsic job factors
Administration	<u>Survey Administration</u> (1) Paper and pencil (2) 5 minutes (3) 20 questions (4) 5-point Likert scaling (extremely satisfied to not satisfied) <u>Readability</u> Flesch-Kincaid: 3.8
Scoring	(1) Simple calculations. (2) <u>Subscale scores</u> = Sum of items on the subscale. (3) Higher scores indicate higher job satisfaction.
Availability	Fee charged. The short form is available in quantities of 50 or more for \$0.39 per copy. A users' manual is also available, for \$4.95. An order form for the MSQ can be found at: http://www.psych.umn.edu/psylabs/vpr/orderform.html . Scoring can be done by the user following the simple rules described in the users' manual. Alternatively, surveys may be machine scored by the vocational Psychology Institute at a cost of \$1.10 per form.
Reliability	Internal consistency ranges from .84 - .91 for the Intrinsic subscale, from .77 - .82 for the Extrinsic subscale, and from .87 - .92 for the General Satisfaction scale.
Validity	Construct validity: <ul style="list-style-type: none">• Extensive reviews have rated construct validity as "adequate", but some find that validity could be improved by dropping or reassigning several items.• Intrinsic satisfaction is more strongly related to job involvement than extrinsic. Intrinsic has a more emotional basis than extrinsic.
Contact Information	The instrument is available from: Vocational Psychology Research N657 Elliott Hall University of Minnesota Minneapolis MN 55455-0344 Phone: (612) 625-1367 vpr@tc.umn.edu.

Survey Items

Key to Which Questions Fall into Which Subscales

IS = Intrinsic Satisfaction subscale (12 items)
 ES = Extrinsic Satisfaction subscale (6 items)
 GI = General items (2 items, plus all other items)

Ask yourself: How satisfied am I with this aspect of my job?

5=extremely satisfied
 4=very satisfied
 3=satisfied
 2=somewhat satisfied
 1=not satisfied

IS	1.	Being able to keep busy all the time.
IS	2.	The chance to work alone on the job.
IS	3.	The chance to do different things from time to time.
IS	4.	The chance to be somebody in the community.
ES	5.	The way my boss handles his/her workers.
ES	6.	The competence of my supervisor in making decisions.
IS	7.	Being able to do things that don't go against my conscience.
IS	8.	The way my job provides for steady employment.
IS	9.	The chance to do things for other people.
IS	10.	The chance to tell people what to do.
IS	11.	The chance to do something that makes use of my abilities.
ES	12.	The way company policies are put into practice.
ES	13.	My pay and the amount of work I do.
ES	14.	The chances for advancement on this job.
IS	15.	The freedom to use my own judgment.
IS	16.	The chance to try my own methods of doing the job.
GI	17.	The working conditions.
GI	18.	The way my coworkers get along with each other.
ES	19.	The praise I get for doing a good job.
IS	20.	The feeling of accomplishment I get from the job.

Misener Nurse Practitioner Satisfaction Scale

Description	The Misener Nurse Practitioner Satisfaction Scale is designed to assess six dimensions of job satisfaction: (1) Intrapractice partnership/collegiality; (2) Challenge/autonomy; (3) Professional, social, and community interaction; (4) Professional growth; (5) Time; and (6) Benefits.
Measure	<u>Subscales</u> (1) Collegiality (2) Challenge/autonomy (3) Professional, social, and community interaction (4) Professional growth (5) Time (6) Benefits
Administration	<u>Survey Administration</u> (1) Paper and pencil (2) 5-10 minutes (3) 44 questions (4) 6-point Likert scaling (very dissatisfied to very satisfied) <u>Readability</u> Flesch-Kincaid: 7.5
Scoring	(1) Simple calculations. (2) Subscale scores = Sum of items on the subscale. (3) Higher scores indicate higher job satisfaction.
Availability	Free.
Reliability	Internal consistency ranges from .79 - .94 for the subscales.
Validity	Construct validity: <ul style="list-style-type: none"> Correlations between subscales range from .33 to .72, suggesting that the subscales are measuring separate dimensions.
Contact Information	Not needed for use of the instrument.

Survey Items

Key to Which Questions Fall into Which Subscales

IP/C = Intrapractice partnership/collegiality subscale (14 items)
 C/A = Challenge/autonomy subscale (10 items)
 PSCI = Professional, social, and community interaction subscale (8 items)
 PG = Professional growth subscale (6 items)
 T = Time subscale (3 items)
 B = Benefits subscale (3 items)

The following is a list of items known to have varying levels of satisfaction among nurse practitioners. There may be items that do not pertain to you, however, please answer them if you are able to assess your satisfaction with the item based on the employer's policy.

How satisfied are you in your current job as a nurse practitioner with respect to the following factors?

- 6=Very Satisfied
- 5=Satisfied
- 4=Minimally satisfied
- 3=Minimally dissatisfied
- 2=Dissatisfied
- 1=Very dissatisfied

B	1.	Vacation/leave policy
B	2.	Benefit package
B	3.	Retirement plan
T	4.	Time allotted for answering messages
PG	5.	Time allotted for review of lab and other test results
IP/C	6.	Your immediate supervisor
C/A	7.	Percentage of time spent in direct patient care
T	8.	Time allocation for seeing patients
IP/C	9.	Amount of administrative support
PSCI	10.	Quality of assistive personnel
T	11.	Patient scheduling policies and practices
C/A	12.	Patient mix
C/A	13.	Sense of accomplishment
PSCI	14.	Social contact at work
PSCI	15.	Status in the community
PSCI	16.	Social contact with your colleagues after work
PSCI	17.	Professional interaction with other disciplines
PG	18.	Support for continuing education
PG	19.	Opportunity for professional growth
PG	20.	Time off to serve on professional committees
PG	21.	Amount of involvement in research
C/A	22.	Opportunity to expand your scope of practice
PSCI	23.	Interaction with other NPs including faculty
IP/C	24.	Consideration given to your opinion and suggestions for change in the work setting or office practice
IP/C	25.	Input into organizational policy
IP/C	26.	Freedom to question decisions and practices
C/A	27.	Expanding skill level/procedures within your scope of practice
C/A	28.	Ability to deliver quality care
PG	29.	Opportunities to expand your scope of practice and time to seek advanced education
IP/C	30.	Recognition for your work from supervisors
PSCI	31.	Recognition of your work from peers
C/A	32.	Level of autonomy
IP/C	33.	Evaluation process and policy
IP/C	34.	Reward distribution
C/A	35.	Sense of value for what you do
C/A	36.	Challenge in work
IP/C	37.	Opportunity to develop and implement ideas
IP/C	38.	Process used in conflict resolution
IP/C	39.	Amount of consideration given to your personal needs

C/A	40.	Flexibility in practice protocols
IP/C	41.	Monetary bonuses that are available in addition to your salary
IP/C	42.	Opportunities to receive compensation for services performed outside your normal duties
IP/C	43.	Respect for your opinion
PSCI	44.	Acceptance and attitudes of physicians outside of your practice

Peer-to-Peer Work Relationships

Introduction

Definition of Peer-To-Peer Work Relationships

The peer-to-peer work relationships topic addresses workers' perceptions of their relationships with peer co-workers. It is concerned with both workers' feelings for their peer co-workers, and for workers' attitudes toward their peer group at large (e.g., DCWs' attitudes toward all DCWs, not just those in their organization).

Peer-to-peer work relationships are important for organizations to consider, as coworker relationships have been found to strongly predict turnover (Pillemer, 1997). Further, the nature of coworker relationships has been shown to contribute to job commitment and accepting attitudes toward the elderly in long-term care facilities (Robertson, 1989).

Overview of Selected Measures of Peer-To-Peer Work Relationships

The instrument reviewed under the Job Satisfaction section of this Measurement Guide provides subscales assessing the respondent's satisfaction with his/her relationships with peer co-workers:

1. Satisfaction with Co-Workers Subscale of abridged Job Descriptive Index (aJDI) (1 of 5 subscales)

Issues to Consider When Selecting Measures of Peer-To-Peer Work Relationships

- Although the Misener Nurse Practitioner Satisfaction Scale provides an assessment of collegiality, the scale is not targeted at particular relationships and includes questions regarding the respondent's relationship with both peers and supervisors. Given this, the Misener scale is not included here.

Alternatives for Measuring Peer-To-Peer Work Relationships

*Satisfaction with Co-Workers Subscale of the abridged Job Descriptive Index (aJDI) (1 of 5 subscales)*³

Description	<p>The Job Descriptive Index is perhaps the premier instrument for assessing job satisfaction. It is a multi-faceted assessment of job satisfaction that has been extensively used in research and applied settings for over 40 years. The JDI comes in both long (90 item) and short ("abridged - 25 item) versions. The short form or abridged JDI (aJDI), described here, poses less of an administrative and scoring burden and is, therefore, the version included here.</p> <p>Five facets of job satisfaction are assessed by the JDI. In the aJDI, each facet (or subscale) is composed of 5 items (25 items total). The facets are: work on present job; present pay; opportunities for promotion; supervision; and, coworkers.</p> <p>The JDI adheres to the idea that overall job satisfaction is not simply the sum of satisfaction with different aspects of work. Therefore, an additional scale, Job in General (JIG), evaluates overall job satisfaction. The short form of the JIG scale consists of 8 items.</p>
Measure	Satisfaction with Co-Workers
Administration	<p><u>Survey Administration</u></p> <ol style="list-style-type: none"> (1) Paper and pencil. (2) Approximately 2 minutes or less (3) 5 questions (4) Respondent indicates if each question does or does not describe their work situation <p><u>Readability</u> Flesch-Kincaid: 3.9</p>
Scoring	<ol style="list-style-type: none"> (1) Scoring algorithms are described in the User's Manual. SAS and SPSS scoring code is available. (2) Not known. (3) Not known.
Availability	Bowling Green State University owns a copyright of the JDI and JIG. The subscale is not available separately from the JDI. Cost depends on user status (academic or commercial) and whether the user is willing to share collected data with the JDI research group.
Reliability	Internal consistency of the scale has been consistently shown to be >.70.
Validity	An extensive meta-analysis of the measurement properties of the JDI found that content, criterion-related, and convergent validity are well established (e.g., correlates as expected with turnover and other job satisfaction measures).
Contact Information	<p>The JDI is available from:</p> <p>JDI Research Group Bowling Green State University Department of Psychology Bowling Green, OH 43403 Phone: (419) 372-8247 jdi_ra@bgnet.bgsu.edu</p>

³ The other four subscales for the *Job Descriptive Index (JDI)* can be found in the Job Satisfaction topic section of this Appendix.

Survey Items

The Job Satisfaction section in this Appendix contains sample items for this subscale of the JDI.

Worker-Supervisor Relationships

Alternatives for Measuring Worker-Supervisor Relationships

External Satisfaction (ES) Subscale from the Minnesota Satisfaction Questionnaire (MSQ)

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Description	The Minnesota Satisfaction Questionnaire (MSQ) is a popular measure of job satisfaction that conceptualizes satisfaction as being related to either intrinsic or extrinsic aspects of the job. Intrinsic satisfaction is related to how people feel about the nature of their job tasks, while extrinsic satisfaction is concerned with aspects of the job that are external or separate from job tasks or the work itself. The MSQ has been in use for over 30 years in a wide range of jobs, including factory and production work, management, education (primary, secondary, college), health care (including nurses, physicians, and mental health workers), and sales. Several studies of nursing assistants in long term care facilities have used the MSQ (Friedman et al., 1999; Grieshaber et al., 1995; Waxman et al., 1984).
Measure	External Satisfaction (ES)
Administration	<p><u>Survey Administration</u></p> <p>(1) Paper and pencil (2) Approximately 2 minutes or less (3) 6 questions (4) 5-point Likert scale (not satisfied to extremely satisfied)</p> <p><u>Readability</u> Flesch-Kincaid: 4.2</p>
Scoring	<p>(1) Simple calculations. (2) <u>Subscale scores</u> = Sum of items on the subscale (Range 0 - 30). (3) Higher scores indicate higher job satisfaction.</p>
Availability	Fee.
Reliability	Internal consistency of the External Satisfaction (ES) subscale ranges from .77 - .82.
Validity	As with MSQ generally, psychometric investigations have rated the construct validity of the scale as adequate.
Contact Information	<p>The instrument is available from:</p> <p>Vocational Psychology Research N657 Elliott Hall University of Minnesota Minneapolis MN 55455-0344 Phone (612) 625-1367 vpr@tc.umn.edu</p>

Survey Items

The Job Satisfaction section in this Appendix contains the items for this subscale of the MSQ.

Satisfaction with Co-Workers Subscale of the abridged Job Descriptive Index (aJDI) (1 of 5 subscales)⁴

Description	<p>The Job Descriptive Index is perhaps the premier instrument for assessing job satisfaction. It is a multi-faceted assessment of job satisfaction that has been extensively used in research and applied settings for over 40 years. The JDI comes in both long (90 item) and short ("abridged - 25 item) versions. The short form or abridged JDI (aJDI), described here, poses less of an administrative and scoring burden and is, therefore, the version included here.</p> <p>Five facets of job satisfaction are assessed by the JDI. In the aJDI, each facet (or subscale) is composed of 5 items (25 items total). The facets are: work on present job; present pay; opportunities for promotion; supervision; and, coworkers.</p> <p>The JDI adheres to the idea that overall job satisfaction is not simply the sum of satisfaction with different aspects of work. Therefore, an additional scale, Job in General (JIG), evaluates overall job satisfaction. The short form of the JIG scale consists of 8 items.</p>
Measure	Satisfaction with Co-Workers
Administration	<p><u>Survey Administration</u></p> <p>(1) Paper and pencil. (2) Approximately 2 minutes or less (3) 5 questions (4) Respondent indicates if each question does or does not describe their work situation</p> <p><u>Readability</u> Flesch-Kincaid: 3.9</p>
Scoring	<p>(1) Scoring algorithms are described in the User's Manual. SAS and SPSS scoring code is available. (2) Not known. (3) Not known.</p>
Availability	Bowling Green State University owns a copyright of the JDI and JIG. The subscale is not available separately from the JDI. Cost depends on user status (academic or commercial) and whether the user is willing to share collected data with the JDI research group.
Reliability	Internal consistency of the scale has been consistently shown to be >.70.
Validity	An extensive meta-analysis of the measurement properties of the JDI found that content, criterion-related, and convergent validity are well established (e.g., correlates as expected with turnover and other job satisfaction measures).
Contact Information	<p>The JDI is available from</p> <p>JDI Research Group Bowling Green State University Department of Psychology Bowling Green, OH 43403 Phone: (419) 372-8247 jdi_ra@bgnet.bgsu.edu</p>

⁴ The other four subscales for the *Job Descriptive Index (JDI)* can be found in the Job Satisfaction topic section of this Appendix.

Survey Items

The Job Satisfaction section in this Appendix contains sample items for this subscale of the JDI.

Instruments Which Require New Data Collection -- Measures of the Organization

Organizational Culture

Alternatives for Measuring Organizational Culture

Nursing Home Adaptation of the Organizational Culture Profile (OCP)

<p>Description</p>	<p>Sheridan et al. developed the Nursing Home Culture Profile in a study of continuous quality improvement initiatives in 30 nursing homes in Texas (1995). The instrument is an adaptation of the more general Organizational Culture Profile (OCP) that involved having employees identify the culture values shared by organization members rather than relying on researchers' expectations (O'Reilly et al., 1991). Accordingly, 6 staff focus groups were used to generate a list of statements that represent values that may be shared by nursing home staff. This represents a more grounded approach to culture, not based on previously established measures of what constitutes important dimensions of culture.</p> <p>Respondents from all levels and departments are included and the exercise can be administered on site. The format used by Sheridan et al. was a Q-sort procedure in which each respondent was given a stack of 18 cards each containing one of the value statements. They were instructed to sort the cards into categories that created a forced (2,4,6,4,2) bell-shaped distribution where the two most important were labeled 5, the two least important labeled 1, etc. The logic of forcing the distribution is that a variety of natural rating biases will result in little variation if staff is asked to simply rate (on a Likert type scale) these values. Personal communication with the lead researcher indicated that this process was cumbersome and challenging for some respondents, however.</p> <p>In the Texas study, the responses from the 747 raters in the 30 facilities were factor analyzed and three dimensions were identified (4 items did not appear to load on any factor):</p> <p><u>Concern</u> -- the importance of mutual trust and concern between administration and employees as well as caring attitudes of staff toward residents (5 items)</p> <p><u>Teamwork</u> -- the importance of cooperation and balanced priorities among staff, administration and resident families in providing care (5 items)</p> <p><u>Being Best</u> -- the importance of problem-solving and improvement initiatives by employees and administrative support to provide the best care possible (4 items)</p>
<p>Measure</p>	<p><u>Subscales</u></p> <ul style="list-style-type: none"> (1) Concern (2) Teamwork (3) Being the best
<p>Administration</p>	<p><u>Survey Administration</u></p> <ul style="list-style-type: none"> (1) Q Card sort (not a survey) (2) Time not reported (3) 18 values statements, each on a separate card (4) Raters group cards into a forced bell-shaped distribution, to produce more variation than may occur with a Likert scale <p><u>Readability</u> Flesch-Kincaid: 6.6</p>

Scoring	(1) Q-sort requires multivariate statistics and is not recommended. Adapting the value statements on the cards into survey questions would be preferable. (2) Scoring currently requires factor analysis and is not recommended. (3) Scoring of subscales is not applicable here.
Availability	Free.
Reliability	Not reported and not applicable, since the items are value statements without response options.
Validity	Construct validity: <ul style="list-style-type: none"> Factor analysis of the 18 sorted card results confirmed 3 dimensions or subscales. Significant differences by facility in the culture dimensions; these differences discriminated between high and low-performing facilities on the Baldrige standards for CQI implementation.
Contact Information	Not needed for use of this instrument.

Survey Items (Q Sort Card Items)

Value statement in NHCP instrument	Factor 1 Concern	Factor 2 Teamwork	Factor 3 Being Best
Trust – Employees feel free to state their problems and ideas with other staff and administration.	.40	.03	.02
Well Being – Our pay, benefits, and training show that this home is concerned about us.	.50	.12	.28
Listening – Supervisors and Administrators listen to the ideas of employees. They do something about these ideas.	.63	.12	.04
Caring Attitude – We all enjoy helping residents and take time to do the little things that make them feel at home.	.56	.02	.06
Resident Rights – We respect all residents -- even those who may be difficult.	.49	.28	.30
Responsibility – Employees come to work and do their fair share of the work.	.09	.56	.17
Balanced Priorities – The needs of the residents are as important as budget worries.	.13	.49	.07
Self-Initiative – When things need to be done, employees do it even though it may not be their job.	.19	.45	.27
Teamwork – Employees respect each other and work together as a team.	.12	.61	.14
Family Involvement – Families know what is going on with their loved ones and are encouraged to stay involved in the home.	.26	.53	.00
Support for Employees – We have enough staff and supplies so that we can give the best care to all residents.	.29	.18	.50
Reputation – We are proud to work here because it has a good reputation in the community.	.04	.27	.57
Problem Solving – We like to solve problems on our own and look for better ways to do our jobs.	.03	.13	.51
Be the Best – Employees work very hard to be the best nursing home in the area.	.28	.04	.57
Resident Focus – We try to guess what residents need and look for ways to please residents and their families.	.31	.28	.03
Cooperation – Dietary, housekeeping, and nursing work well together to meet all the residents' needs.	.06	.02	.25
Good Communication – We are kept totally informed about any changes that will affect us.	.30	.18	.15
Changes – We are encouraged to find new ways to improve the quality of services. Our ideas are supported and welcomed.	.36	.23	.23
Eigenvalue	2.32	1.74	1.45

Organizational Structure

Introduction

Definition of Organizational Structure

There are numerous different definitions of organizational structure. In one sense, organizational structure is the way duties are arranged to get work done. While there are many features of organizational structure, we focus on those that have been shown to affect the work life of DCWs. Some aspects of organizational structure are appropriate to be measured mainly from the perspective of management (e.g., are formal procedures used to manage the work of home health aides). However, other aspects of organizational structure (e.g., decision making structure, communication, leadership) are best addressed by measuring perceptions at multiple levels within the organization (e.g., nurse aide, charge nurse, DON, administrator).

Overview of Selected Measures of Organizational Structure

Research on organizational structure in long term care settings is scarce and this topic needs further development. We include one measure that addresses the leadership and communication dimension of organizational structure:

1. Communication and Leadership Subscales of the Nursing Home Adaptation of the Shortell Organization and Management Survey

Issues to Consider When Selecting Measures of Organizational Structure

- To date, no issues have been identified for use of this instrument.

Alternatives for Measuring Organizational Structure

Communication and Leadership Subscales of the Nursing Home Adaptation of the Shortell Organization and Management Survey

Description	<p>Communication among those involved in providing care has been shown to be a critical factor in quality of care and in turnover in hospital intensive care units (Shortell et al., 1991). A number of reports about the working conditions of DCWs in long term care have indicated that communication is a highly meaningful aspect of DCWs' being recognized as part of a care team. However, direct measurement of communication quality in LTC settings has been lacking.</p> <p>Shortell and colleagues developed and tested a measure of communication among professional staff in Intensive Care Units (ICUs) as part of their larger Organization and Management Survey (1991). The multi-item communication subscales included openness, accuracy, timeliness, understanding and satisfaction with communication. The subscales were highly correlated in the ICU study.</p> <p>Scott-Cawiezell and her colleagues have adapted and tested the Shortell Organization and Management Survey for use in nursing homes (1991). Scott et al. surveyed RNs, LPNs, and CNAs in a sample of 32 Colorado nursing homes (additional samples of 42, and 60 have produced comparable results). Factor analysis (a statistical technique used to explore what items go together to measure an underlying concept) of 69 items collected from this sample resulted in five factors (or groupings among the items) (Scott et al., 2003). These factors (shown as subscales below) include two about leadership, two about communication, and one that is a mix of items on leadership and communication. Further analyses have evolved the subscales to Organizational Harmony, Connectedness, and Clinical Leadership (Scott-Cawiezell et al., in press).</p>
Measure	<p><u>Initial Subscales</u></p> <ol style="list-style-type: none"> (1) Connectedness (2) Timeliness & Understanding (3) Organizational Harmony (4) Clinical Leadership (5) Perceived Effectiveness <p><u>Later Subscales that were Nursing Home specific</u></p> <ol style="list-style-type: none"> (1) Organizational Harmony (2) Connectedness (3) Clinical Leadership (4) Timeliness and Understanding (5) Perceived Effectiveness
Administration	<p><u>Survey Administration</u></p> <ol style="list-style-type: none"> (1) Paper and pencil (2) 15-20 minutes (3) 69 questions (4) 5-point Likert scale (strongly agree to strongly disagree) <p><u>Readability</u></p> <p>Flesch-Kincaid is not yet available. (This has been well received and used in over 150 nursing homes across all levels of staff.)</p>
Scoring	<ol style="list-style-type: none"> (1) Simple calculations. (2) <u>Score</u> = Average of the items in a subscale, after reversing negatively worded items (Range 1 - 5). (3) Higher scores indicate better perceived communication (or leadership).

Availability	Contact Jill Scott-Cawiezell for availability information (information below).
Reliability	Internal consistency of subscales ranges from .83 to .94, in a sample of CNAs, LPNs, and RNs.
Validity	Construct validity: <ul style="list-style-type: none"> Assessed by exploring relationship between subscales from another tested tool, the Competing Values Framework Organizational Culture Assessment. There was a strong correlation between the adaptation's organizational harmony and connectedness scale and the CVF's subscale that reflects group orientation (and a strong inverse relationship between the CVF's hierarchical dominance subscale and these same subscales of the adaptation).
Contact Information	For information on the instrument and its availability, contact: <p>Jill Scott-Cawiezell, PhD, RN University of Missouri-Columbia S235 Sinclair School of Nursing Building (573) 882-0264 scottji@missouri.edu</p>

Survey Items

NOTE: Below is only a sample of the items in the survey.

Key to Which Questions Fall into Which Subscales

Only a subset of items in each of the 5 subscales is provided below.

Response options use a 5-point Likert scale (1=strongly disagree to 5=strongly agree).

Connectedness (total number of items not yet known)

1. I take pride in this facility
2. I identify with the facility goals
3. I am part of the team

Timeliness and Understanding (total number of items not yet known)

1. We get information when we need it
2. Physicians are available when they are needed
3. We get information about changes in resident status

Organizational Harmony (total number of items not yet known)

1. Nurses are uncertain where they stand (reversed)
2. Nursing leadership is out of touch with staff concerns (reversed)
3. Decisions are made without staff input

Clinical Leadership (total number of items not yet known)

1. Staff meetings are used to resolve issues
2. Staff interests are represented at higher levels of the facility
3. Standards of excellence are emphasized

Perceived Effectiveness

1. Our facility meets patient care goals
2. Our residents experience very good outcomes
3. Our facility does a good job of meeting family needs

MEASURING LONG-TERM CARE WORK: A Guide to Selected Instruments to Examine Direct Care Worker Experiences and Outcome

PDF Files Available for This Report

Cover, Table of Contents, Acknowledgments and Executive Summary

<http://aspe.hhs.gov/daltcp/reports/dcwguide.pdf>

CHAPTER 1: Introduction and Purpose of Guide

<http://aspe.hhs.gov/daltcp/reports/dcwguide1.pdf>

CHAPTER 2: How This Guide Can Help Organizations Use Information to Address the Challenges of Job Retention and Performance Among DCWs

<http://aspe.hhs.gov/daltcp/reports/dcwguide2.pdf>

CHAPTER 3: Ready to Use Instruments <http://aspe.hhs.gov/daltcp/reports/dcwguide3.pdf>

References <http://aspe.hhs.gov/daltcp/reports/dcwguide4.pdf>

APPENDIX A: From Start to Finish -- Sample Scenarios of Using and/or Constructing Survey Instruments <http://aspe.hhs.gov/daltcp/reports/dcwguideA.pdf>

APPENDIX B: Overview Charts of Chapter 3 Measures, By Topic

<http://aspe.hhs.gov/daltcp/reports/dcwguideB.pdf>

APPENDIX C: Data Collection Planning and Implementation Issues

<http://aspe.hhs.gov/daltcp/reports/dcwguideC.pdf>

APPENDIX D: Resources for Providers Considering Use of Employee Surveys

<http://aspe.hhs.gov/daltcp/reports/dcwguideD.pdf>

APPENDIX E: Individual Measures from Chapter 3 that Use Survey Instruments to Collect Data, By Topic <http://aspe.hhs.gov/daltcp/reports/dcwguideE.pdf>

APPENDIX F: Ready Made Multi-Topic Survey Instruments

<http://aspe.hhs.gov/daltcp/reports/dcwguideF.pdf>

APPENDIX G: Instruments Needing Work <http://aspe.hhs.gov/daltcp/reports/dcwguideG.pdf>

APPENDIX H: Guide Reviewers <http://aspe.hhs.gov/daltcp/reports/dcwguideH.pdf>